Name (p	orint) Civil Dr Dr Domo		9509		rict (if applicable)
Mailing	Address (include city and zio code)	100	,,,,,	Telephone No.	
E-Mall A	adress as com				
Select /	Appropriate Box(es) CANDIDATE PAC POL	L PRTY IN	DEXP NO	NPROFIT CORP	
	☐ LEGAL DEFENSE FUND ☐ AM	IENDED			
in the contract of				Carlo Carlo Company	COLUMN CONTRACTOR OF THE CONTRACTOR OF T
	Annual Filing - Due January 15, 2008 Period: January 1, 2007 - December 31, 2007				
	Report #1 — Due August 5, 2008*				
	Period: Jan. 1, 2008 — July 31, 2008				
	Report #2 Due — October 28, 2008*				N2
	Period: Aug. 1, 2008 — Oct. 23, 2008				7E1 100
	Report #3 Due — January 15, 2009*/** Period: Oct. 24, 2008 — Dec. 31, 2008				35 8
				FOR OFF	ICE USE ONLY
	Annual Filing - Due January 15, 2009 Period: January 1, 2008 - December 31, 2008				00
*	These Reports are filed by incumbents/candidate	s running for	office in the	2008 election cyc	cle 🚊 👱
**	Third Report suffices for 2009 Annual Filing if car	ndidate also	filed Report I	Nos. 1 and 2	Cumulative
	CONTRIBUTIONS SUMMARY			This Period	Report Period #1 through End of
				Tills Feriod	This Reporting Period
	Total Monetary Contributions Received in Excess of \$100			a man	9 000
	(See page 1 of instruction sheet)			1,000	1,000
	Total Monetary Contributions Received of \$100 or Less (See page 2 of instruction sheet)			1,850	1,900
	3. Total Monetary Contributions in the form of loans guaranteed	d by a third		52003	5.205.33
	party. (See page 2 of instruction sheet)			3,200,00	1
	 Total Monetary Contributions in the form of loans that were for (See page 2 of instruction sheet) 		umulative From	9	9
	Thi	is Period B	eginning of eport Period #1		
		I	hrough End of his Reporting		
	5. Total Amount of Monetary Contributions	P	eriod		
	Received			16,055,3	3 16,105.3
	(Add Lines 1 through 4) (See page 2 of instruction sheet) 6. Total Amount of Written Commitments for				
	Contributions (When commitment is funded, report as contribution (monetary or in kind))	0	0		
	(See page 2 of instruction sheet) 7. Total Value of In Kind Contributions Received in	2	,,,	25	
	Excess of \$100 (See page 2 of instruction sheet)	16.35	116	22	
	EXPE	NSES SUMM	ARY		
	Total Monetary Expenses Paid in Excess of \$100			11/12/20	1111 - 30
	(See page 2 of instruction sheet)			11,612.39	11,612.39
	9. Total Monetary Expenses Paid of \$100 or Less (See page 2 of instruction sheet)			30	175.55
	10. Total Amount of All Monetary Expenses Paid			11,64239 1	1787 94
	(Add Lines 8 and 9) (See page 2 of instruction sheet)	61	*	17010011	1 5 1 1
	Total Value of In Kind Expenses in Excess	0)	P		
	11. Total Value of In Kind Expenses in Excess of \$100 (See page 3 of instruction sheet)				
	of \$100 (See page 3 of instruction sheet) 12. Disposition of Unspent Contributions (Only reported on Report #3, Annual Report or 15th)				
	of \$100 (See page 3 of instruction sheet) 12. Disposition of Unspent Contributions (Only reported on Report #3, Annual Report or 15th day of the second month after candidates defeat or	2			
	of \$100 (See page 3 of instruction sheet) 12. Disposition of Unspent Contributions (Only reported on Report #3, Annual Report or 15th)	2			
	of \$100 (See page 3 of instruction sheet) 12. Disposition of Unspent Contributions (Only reported on Report #3 , Annual Report or 15th day of the second month after candidates defeat or incumbent does not run for reelection) (See page 3 of instruction sheet)	AFFIRMATION In June 18 True	I and Correct		
	of \$100 (See page 3 of instruction sheet) 12. Disposition of Unspent Contributions (Only reported on Report #3, Annual Report or 15th day of the second month after candidates defeat or incumbent does not run for reelection) (See page 3 of instruction sheet)	AFFIRMATION oing is True	I and Correct.		



Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 RD PARTY IF LOAN GUARANTEED BY 3 RD PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN, IF DIFFERENT THAN CONTRIBUTOR
Jounie Pullman 1755 Circle Dr Reno 89509	8/4/08	5,205.33	V		
Michael glaurie 33755ierra Cras Reno NV 8954	\$ \$13/08	100-			
Suellen Fultone 1855 Creek Crossii Reno 89511	8/10/08	150-			
Fund for NV Fut 10299 Lucentell Reno 89512	ey 8/08	500			
Comm to Elect J 53012+65+ 6000ks 89431	ohn Mayer 421	50-			
Cynthia Mitchell 530 colgate Peno NV 8950	8/15	25			
Jour Kaiser 2190 matteoni Ton 3parks, NV 89 heann McElroy	434 429	50-			
Wann McElroy 2780 Dant Bluck Reno 89509	9/08	25-			
Julia Ratti 535 44h 5t Sparks 89431	9/07	100			
NV Tri-Partners 500 Dumonte RP #703 Reno 89521	LIC 9/12	250			
Karen Barsell 1470 Brentfordi Reno 89571	60	50-			
Kit Prendergast 301 Flintst. #1 News 89501	9/09	35 -			
knnifer stern 920 marsh ave Peno 89509 Jenere Fagan	/	100-			
Leno, NV Pierre Hascheff	9/20	100			
leno 89503	9/24	500			

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PAGE 2 OF 12

CAMPAIGN CONTRIBOTIONS	A THE PERSON OF SHEET PROPERTY OF THE PERSON
Somie Pullman	State Pourd of Ed
Name (print)	Office (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 RD PARTY IF LOAN GUARANTEED BY 3 RD PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN, IF DIFFERENT THAN CONTRIBUTOR
gharon abonate	l Bear				
Peno 89509	9/18	100-			
USEATOSPHER IN 3511 E. Harmon A	re 9/23	500			
Paula Berkley 1 908 Nixon Peno 89509	45500	100			
Sheila hedie 825 Humboldt Reno 89509	9/15	500			
Alison Gaulden po Box 10911 Reno 189510	9/15	250-			
Op. Engineers 1 DISTIL PAC 1620 5. Loopld	*3 9/29	500			
Alumeda CA 9450Z					
Debbie Smith Ca 3770 LOI / MOID	9/20	100-			
Reno 89 431 Friends for Kit 1057 Universit Deno 89503	y sung g Terrace 9/30	100			
Fred Boxd 2041 M+n Visto Reno 89579	w98/2	65			
Gerry Leberts 4615 Sommers! Remo 895 19	le way 10/1	100			
Eugene Huddle 775 Ci Whedale I Mill Valley CA Barbara Duckle	1-1	300			100
anguign	1.10	500			
42 Halbrack D. L.V. 89103					
Michael 4Lois 1 1750 Circle Dr Reno 89807	talley 10/5	50-			

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		THE RESERVE OF THE PERSON NAMED IN	NAME OF TAXABLE PARTY OF TAXABLE PARTY.	The Real Property lies and with the last of the last o
Jonnie	Pullman	State	Board	of Ed
Name (print)	1000000		applicable)	

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 RD PARTY IF LOAN GUARANTEED BY 3 RD PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN, IF DIFFERENT THAN CONTRIBUTOR
Barbara seleibe 4971 FOXCVEEKTY Reno 89521	10/5	50-			
Donald Clark 701 MarshAve Leno 89509	10/5	200-			
Conservina True ROBOX 7548 Reno 89510	ide	2,500			
PMB 259 8175 5. Vgna R	10/7 no 89511	50			
Minde & Boxis Lot 4208 Pinto Lend 89519	10/8	100			
A.P. Hansen U50 5. Rock B/V Remo 89502	10/1	25			
Michael & Laurie 3375 Sierra Crest Reno 89519	Haley 10/11	200-			
Jane Dunn 589 Put nam Dr Rmo 89503	10/13	25			
James Sue Smith 775 Cheighton Way Klub 89503	10/13	100-			
Meri Shadley 555 Creighton was Lino 89563	10/14	56-			
Here Pullman 1955 Circle DV Reno 89509	10/13	200-			
Fund for NV F 10299 Lucenteine Rento 89503	710/21	500-			
Refer C. Neuman 1 Elm ct Reno 89501	10/16	200-			
Rick Riviglio 9505, Rock Blue Sparks 89431		250-			
Jones Vargas 100 W. Liberty Reno 89501	+ 10/14	1000			

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bonaie /
Name (print)

Office (if applicable)

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 RD PARTY IF LOAN GUARANTEED BY 3 RD PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN, IF DIFFERENT THAN CONTRIBUTOR
Laura Dickely POBOX 1900 Keno, NV 89505	10/20	100-			

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FI 201 d00 Revised: Dec-07

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Chard of Education
Office (if applicable)

District (if applicable)

Written Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100 Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary

NAME AND ADDRESS OF PERSON WHO MADE THE COMMITMENT	DATE OF EACH COMMITMENT	AMOUNT OF EACH COMMITMENT
6		
7		

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PAGE 6 OF 12



Name (print)

Office (if applicable)

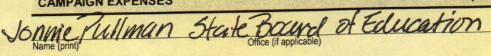
District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	В
Expenses related to travel	С
Expenses related to advertising	D
Expenses related to paid staff	Е
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	н
** Goods and services provided in kind for which money would otherwise have been paid	1
Other miscellaneous expenses	J

** NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.





Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
Trigger interactive Development GA	D	7/30	
Clearstan Credit Union Bible St Reno NV	A	蠿	a
Leopard Print amenil 430 Stoker Ave	A	8/07	376.15
Trigger Interactive Dev 10# 404 6039535	D	8/17	14.95
Reno High School Soccer Foster Dr. Reno	Ð	9/3	25.00
Alphabet Soup 2605 Tuscan Way Sparks 89434 Leopard Print 9Mail	D	9/4	326.96
Reno 89503	D	9/6	235,49
Donald Molfat donald molfat hundon, Eng	F	9/7	400-
Donald Moffat hondon, Eng.	F	9/12	400-
Reopard Print amail	カ	9/19	235,49
Senior Speetrum 1105 Terminal Way Reus 89502	D	9/26	550-
Trigger Interactive Development	D	10/07	250-

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Revised: Dec-07

CHINI AICH				Name and Address of the Owner, where the Owner, which is the Owner, which is the Owner, where the Owner, which is the Owner, which	NAME AND ADDRESS OF THE OWNER, WHEN PARTY AND ADDRESS OF THE PARTY AND	Charles of the last of the las
THE RESERVE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TW	Pullman		Bound applicable)	of Educe	ation District	(if applicable)
Name (print)		Onice (iii	applicable			

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
PDQ Printing of LV 38205 Valley View Blu Las Viegas 89103 William Cartin	e D	19/17	8,533.40
william Cartin	D	10/18	250-
	- 1 au - 1 au		

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#2

Jonnie Pullman

Stak b Office (if applicable) District (if applicable)

IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Value of All In-Kind Campaign Contributions to Line 7 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRI- BUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION/ COMMITMENT	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 RD PARTY IF LOAN GUARANTEED BY 3 RD PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN
sw Reg. Cau To Terminal Reco, No 89502	ncilot	Carpente	rs			
89502	11/2/08	Ad Ad	116.35			
			No.			

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PAGE OF 12



In Kind Written Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100 Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary

NAME AND ADDRESS OF PERSON WHO MADE THE IN KIND COMMITMENT	DATE OF EACH IN KIND COMMITMENT	AMOUNT OF EACH IN KIND COMMITMENT	
	5		

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Jomie Pullman State Board of Education

District (if applicable)

IN KIND

Expenses in Excess of \$100

Transfer Total Value of All In-Kind Campaign Expenses to Line 11 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE
Val.			

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Prescribed by Secretary of State NRS 294A.120, 294A.125, 294A.140, 294A.150, 294A.160 294A.200, 294A.210, 294A.220, 294A.362

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Revised: Dec-07